

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF OHIO
EASTERN DIVISION

TONY FISHER, aka KELLIE)	
REHANNA,)	CASE NO.: 4:19-CV-1169
)	
Plaintiff,)	
)	JUDGE SARA LIOI
vs.)	
)	<u>NOTICE OF FILING THE DEPOSITON</u>
FEDERAL BUREAU OF PRISONS,)	<u>OF JOHN DUNLOP, M.D.</u>
<i>et al.</i> ,)	
)	
Defendants.)	

Plaintiff, Tony Fisher, aka Kellie Rehanna, by and through counsel, hereby notifies this Court and Defendants that the deposition of John Dunlop, M.D. that was taken on July 30, 2021 (attached hereto) has been filed in this case.

Respectfully submitted,

/s/Edward A. Icove

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CERTIFICATE OF SERVICE

On August 27, 2021, this document was filed electronically. Notice of this filing will be sent to all parties by operation of the Court's electronic filing system. Parties may access this through the Court's system.

/s/ Edward A. Icové
Edward A. Icové

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF OHIO
EASTERN DIVISION

- - -

Tony Fisher, aka)	
Kellie Rehanna,)	
)	
Plaintiff,)	
)	
vs.)	Case No. 4:19CV1169
)	Sara Lioi, J.
Federal Bureau of)	
Prisons, et al.,)	
)	
Defendants.)	

- - -

Deposition of John Dunlop, M.D., a witness
herein, called on behalf of the plaintiff for oral
examination, pursuant to the Federal Rules of Civil
Procedure, taken before Karen A. Toth, Notary Public
in and for the State of Ohio, pursuant to notice,
via Zoom, on Friday, July 30, 2021, commencing at
9:01 a.m.

- - -

1 APPEARANCES:

2 On behalf of the Plaintiff:

3 Ed Icove, Esq.
4 Icove Legal Group LTD
5 Terminal Tower
6 500 Public Square, Suite 3320
7 Cleveland, Ohio 44113
8 216-802-0000

9 On behalf of the Defendants:

10 Gary Feldon, Esq.
11 Joshua Gardner, Esq.
12 United States Department of Justice
13 Civil Division, Federal Programs Branch
14 1100 L Street NW
15 Room 11502
16 Washington, D.C. 20005
17 202-305-7583

18 Also present:

19 Kellie Rehanna

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WITNESS:

CROSS

John Dunlop, M.D.

by Mr. Icove

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- - -

1 JOHN DUNLOP, M.D.

2 Of lawful age, being first duly sworn, as
3 hereinafter certified, was examined and testified as
4 follows:

5 MR. ICOVE: For the record, will the
6 government stipulate that the oath that was
7 just given by the court reporter via Zoom is
8 sufficient as far as the law is concerned?

9 MR. FELDON: Yes.

10 MR. ICOVE: Thank you.

11 CROSS-EXAMINATION

12 By Mr. Icové:

13 Q Good morning, Doctor. Thanks for taking time
14 out of your schedule. My name is Ed Icové and
15 I represent Tony Fisher, aka Kellie Rehanna
16 who I will be referring to as Kellie.

17 Can you hear me okay?

18 A Yes.

19 Q Good. If there is a time where you can't, you
20 know, this is informal in certain respects,
21 feel free to mention I can't hear you or I
22 don't understand you or please rephrase the
23 question.

24 A Yes, sir.

25 Q Kellie filed this case against the BOP and the

1 Federal Correction Institution Elkton in case
2 number 4:19CV1169, and it's presently pending
3 in the United States District Court, Northern
4 District of Ohio, Eastern Division. Today's
5 date is July the 30th.

6 You are here today to testify as to
7 what you can remember, relate to us regarding
8 Kellie and her treatment; is that fair to say?

9 A Yes.

10 Q Have you ever testified in deposition before?

11 A Yes.

12 Q Have you ever testified in court before?

13 A Yes.

14 Q You understand that your testimony today is
15 the same as if you were in court except that
16 no judge is present? And your counsel may
17 object to a question, and since there is no
18 judge any objection will have to be
19 considered, if necessary, by the court. And
20 if your counsel objects you still must answer
21 the question to the best of your ability,
22 unless he instructs you otherwise. Do you
23 understand that?

24 A Yes.

25 Q Great. What types of cases have you testified

1 before at deposition or in court?

2 A It was an infectious disease case.

3 Q It was a case brought by an inmate against the
4 government?

5 A No, this was an emergency department case 15
6 years ago.

7 Q Okay. That's a while. Could you briefly tell
8 us what your positions have been at the BOP?

9 A My positions?

10 Q Yes.

11 A Clinical director.

12 Q When were you hired as a clinical director?

13 A October 2010.

14 Q Could you briefly provide me with your
15 educational background and your education?

16 A Medical school in Philadelphia, PCLM. Did a
17 rotating internship at Warren General
18 Hospital; internal medicine residency, three
19 years at St. Elizabeth's Hospital. Starting
20 work in the emergency department during my
21 residency and eventually grandfathered in to
22 be certified in emergency medicine and worked
23 for 20-some years in the emergency department.

24 Q What hospital was that?

25 A Where the residency was? St. Elizabeth's.

1 Q And where did you work in the emergency room?

2 A I worked at St. Elizabeth's, I worked at
3 St. Joe's and I worked at another St. Joe's in
4 Parkersburg, and then eventually Lake West
5 Health Systems up in Willoughby, in Ohio.
6 Always for the same -- usually for the same
7 group.

8 Q Besides being board certified in emergency
9 medicine are you board certified in any other
10 medicine?

11 A Right now I'm only certified in correctional
12 health.

13 Q Correctional health?

14 A Yeah. Internal medicine, emergency medicine
15 both have expired.

16 Q Is that a special area to be certified in? I
17 never heard of that before.

18 A It's NCCHC. It's just a -- you know, we took
19 a test, but it's not really -- it's not like
20 being certified in internal medicine or
21 emergency medicine.

22 Q In preparing for your deposition today what
23 documents did you review?

24 A The transgender offender manual and medical
25 management of transgender inmates.

1 Q Were you familiar with those documents prior
2 to today?

3 A Yes.

4 Q When you were in, I'm going to call it private
5 practice because it's not for the government,
6 did you ever treat anybody with gender
7 dysphoria?

8 A I didn't treat -- not in the emergency
9 department. I mean, my private practice was
10 mainly emergency medicine.

11 Q Right. Have you been involved in gender
12 dysphoria treatments when working for the BOP?

13 A Yes.

14 Q And what capacity is that?

15 A Seeing patients and writing their
16 prescriptions.

17 Q What kind of prescriptions do you write?

18 A Usually estrogen and Spironolactone are the
19 most common.

20 Q Approximately how many patients do you see?

21 A Oh, we don't have too many. I don't know the
22 exact number.

23 Q Is it around -- is it fair to say it's around
24 50 or so?

25 A No, not near that.

1 Q Okay. So it would be just a ballpark -- and I
2 don't want you to guess -- ten to 20?

3 A Could be. Maybe ten.

4 Q So without giving up any -- I don't want to
5 ask any privileged information about Kellie or
6 anybody else, but to what extent have you been
7 involved in gender dysphoria treatment?

8 A Well, I take care of probably ten people. I
9 see them -- I may see one a month. It's not
10 like diabetes or, you know.

11 Q Right. It's not like you need to see somebody
12 once a week?

13 A Right.

14 Q Do you receive any -- or have you received any
15 training regarding gender dysphoria?

16 A Only from the BOP in the clinical practice
17 guideline regarding medical management of
18 transgender inmates.

19 Q And those are the documents that you
20 identified for the record prior to this?

21 A Yeah. Yes.

22 Q What kind of training have you received?

23 A Just reading that document.

24 Q Okay. Have you gone to any seminars or any
25 other kinds of presentations that have been

1 put on by the BOP or in the outside community?

2 A No.

3 Q Could you briefly state what your job duties
4 are as clinical director?

5 A Well, see patients mostly. Used to see a lot
6 of patients before COVID, but, you know;
7 certifying all the doctors that used to come
8 in here, credentialing them, credentialing my
9 other doctor that's with me, we run meetings,
10 pharmacy meetings, stuff like that.

11 Q Do you approve or recommend surgeries for
12 people that have physical problems such as
13 cancer or a neck problem or cataract surgery?

14 MR. FELDON: Object to the form.

15 A A lot of those are referred to the region.
16 Especially -- unless it's -- like general
17 surgery, the doctors do come in, and so we
18 would approve a general surgery -- some
19 general surgery cases. But cataracts used to
20 -- they'd have to go to the region.

21 Q So what type of general surgeries do you
22 approve; just in general off the top of your
23 head?

24 A Hernias.

25 Q Anything else you recall?

1 A Well, for emergencies we approve them for the
2 emergency department and then the surgeon sees
3 them in the hospital.

4 Q What type of surgeries are we talking?

5 A There were approved colonoscopies. If you had
6 an emergent acute cholecystitis they would end
7 up in the emergency department.

8 Q Anything else that you can think of as we sit
9 here today?

10 MR. FELDON: Object to the form.

11 A No.

12 Q What type of surgeries would be referred to
13 the region?

14 A Well, sex reassignment would be referred to
15 the region. We used to refer all cataract
16 surgeries, but lately with COVID we've been
17 just approving them. But like we can't do
18 hips. Hip surgery has to be referred to the
19 region. Knee surgery has to be referred to
20 the region. So those people get transferred
21 out if they're approved. Surgeries that we
22 can't do around here, they would be referred
23 to the region.

24 Q Would a SRS be referred to the region and the
25 surgery done someplace else besides Elkton?

1 MR. FELDON: Object to form.

2 A That would be referred.

3 Q Have you ever approved or recommended any
4 gender-affirming surgery for any inmate at the
5 BOP?

6 A We referred one case to the region.

7 Q And when you say you referred one case to the
8 region, did you make a recommendation
9 regarding that one case? I don't need to know
10 the person's name.

11 A We don't make recommendations. You know, we
12 just state the facts.

13 Q And can you give me an example of what type of
14 memo or facts you would provide to the region?

15 A For sex reassignment surgery, you know, we
16 would get the facts of what medicines they're
17 on and the fact that they want to have sex
18 reassignment surgery.

19 Q Is there anything else that you can recall as
20 we sit here today?

21 A I can't recall anything else.

22 Q Do you recall whether Kellie's request was
23 ever referred to the region?

24 A Yes, I recall that.

25 Q It was referred?

1 A Yes, it was.

2 Q Is that the one case you were talking about?

3 A Yes.

4 Q And do you recall what happened to that
5 particular request, to the best of your
6 knowledge, as we sit here today?

7 A I believe it was denied.

8 Q But it's fair to say that wasn't your denial,
9 that was the region's denial?

10 A It was not our denial. We referred it up.

11 Q Did she meet the criteria for referral to the
12 region?

13 A All surgery --

14 MR. FELDON: Object. I'm sorry.
15 I'm going to object. This is calling for this
16 witness's opinion about the meaning of BOP
17 regs, so -- but you can go ahead and answer if
18 you know.

19 THE WITNESS: Shall I answer?

20 MR. FELDON: If you know.

21 A All I can say is all surgeries that are not
22 done here are referred up.

23 Q You had mentioned that there were a couple of
24 criteria that you used in forwarding sexual
25 reassignment surgeries to the region. And did

1 Kellie meet those particular criteria?

2 MR. FELDON: Object. Misstates
3 prior testimony and same objection with regard
4 to this witness's opinion in connection with
5 criteria. You can answer if you know.

6 A Basically we refer up for sex reassignment
7 surgery because the inmate requested it.

8 Q Did she meet the criteria for hormonal
9 therapy?

10 MR. FELDON: Same objection.

11 A Yeah, basically that's a request also. An
12 inmate requests transgender for the meds and
13 they are sent to the psychology department,
14 they diagnose them with gender dysphoria and
15 sends them back and then we're able to start
16 them.

17 Q Are you familiar with gender dysphoria in the
18 sense that -- strike that.

19 If a person underwent gender-affirming
20 surgery, would it eliminate that person's
21 gender dysphoria?

22 A I do not know.

23 Q If a person underwent gender-affirming surgery
24 and the person was a male and then getting the
25 surgery, would it eliminate almost all of the

1 testosterone in her body?

2 A We eliminate the testosterone within the body
3 with Spironolactone.

4 Q That's a medication; is that correct?

5 A Yes.

6 Q If the gender dysphoria surgery went forward
7 would the dosage of that particular drug be
8 lowered?

9 MR. FELDON: Objection. Calls for
10 speculation.

11 A Yes, I think it would be not needed.

12 Q Okay. And let's go back to my prior question
13 because I really didn't understand the answer.
14 But if a man -- a hypothetical man underwent
15 gender-affirming surgery, is it fair to say
16 that a majority of the testosterone would be
17 eliminated?

18 A Yes.

19 Q And, is it fair to say that the testosterone
20 would be eliminated approximately in the 80
21 percent range?

22 A Yes.

23 Q Do you ever recall talking to Andrew
24 Schumacher, PA in January of 2018?

25 A No.

1 Q Okay. Do you recall -- let me see if I can
2 refresh your memory. If I can't, that's fine
3 too. But did you have an opportunity to talk
4 to Andrew Schumacher at all during your work
5 at BOP?

6 MR. FELDON: Objection. Lacks
7 foundation.

8 Q You got to answer the question, Doctor. I'm
9 sorry.

10 A I just said yes.

11 Q Do you recall talking with him about Kellie?

12 A No.

13 Q Do you recall talking to Kellie about her
14 medical situation?

15 A No.

16 Q Do you see Kellie during the course of your
17 employment at the BOP?

18 A Yes. But just meds, take vitals, order labs.

19 Q And how often did that occur?

20 A Maybe two times a year.

21 Q Do you recall talking to Kellie after she
22 filed her request for gender-affirming
23 surgery?

24 A No.

25 Q Do you recall talking to her after she filed

1 that request?

2 A No.

3 MR. FELDON: Objection. Asked and
4 answered.

5 Q Do you remember telling Kellie that nobody at
6 the BOP has gotten gender-affirming surgery?

7 A No.

8 Q Do you recall telling her that she would be
9 the first to get gender-affirming surgery if
10 it's approved by the BOP?

11 A I don't remember that.

12 Q Do you recall encouraging Kellie to keep doing
13 what she was doing in order to reach her goal
14 of getting gender-affirming surgery?

15 A I do not remember that.

16 Q Doctor, I don't have any questions. Thank you
17 very much for coming in today and I'm glad
18 that we could accommodate your schedule, and
19 have a great weekend.

20 THE WITNESS: Thanks a lot.

21 MR. ICOVE: Gary, do you want to
22 mention for the record about waiver of
23 signature?

24 MR. FELDON: We'll read and sign.

25 (Deposition concluded a 9:23 a.m.)

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SIGNATURE PAGE

Case Name: Tony Fisher, etc. vs. Federal Bureau
of Prisons, et al.

Case Number: 4:19CV1169

Deponent: John Dunlop, M.D.

Date: Friday, July 30, 2021

To the Reporter:

I have read the entire transcript of my
Deposition taken in the captioned matter or the same
has been read to me. I request that the following
changes be entered upon the record for the reasons
indicated.

I have signed my name to the Errata Sheet and
the appropriate Certificate and authorize you to
attach both to the original transcript.

John Dunlop, M.D.

Subscribed and sworn to before me this
____ day of _____, 2021.

Notary Public

My commission expires:_____.

1 I have read the foregoing transcript from page 1
2 through page 17 and note the following corrections:

3 PAGE-LINE REQUESTED CHANGE REASON FOR CHANGE

25 _____
John Dunlop M.D.

Date

1 State of Ohio,)
 2 County of Cuyahoga,) SS: CERTIFICATE

3 I, Karen A. Toth, Notary Public in and for the
 4 State of Ohio, duly commissioned and qualified, do
 5 hereby certify that the within named witness,
 6 John Dunlop, M.D., was by me first duly sworn to
 7 testify the truth, the whole truth, and nothing but
 8 the truth in the cause aforesaid; that the testimony
 9 then given by him was by me reduced to
 10 stenotypy/computer in the presence of said witness,
 11 afterward transcribed, and that the foregoing is a
 12 true and correct transcript of the testimony so
 13 given by him as aforesaid.

14 I do further certify that this deposition was
 15 taken at the time and place in the foregoing caption
 16 specified and was completed without adjournment

17 I do further certify that I am not a relative,
 18 counsel, or attorney of either party, or otherwise
 19 interested in the event of this action.

20 IN WITNESS WHEREOF, I have hereunto set my
 21 hand and affixed my seal of office at Cleveland,
 22 Ohio on this 5th day of August, 2021.

23 *Karen A. Toth*

24 Karen A. Toth, Notary Public in
 25 and for the State of Ohio.
 My Commission expires May 6, 2023.



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1 I have read the foregoing transcript from page 1
2 through page 17 and note the following corrections:

3 PAGE-LINE REQUESTED CHANGE REASON FOR CHANGE

24 /s/ John Dunlop, D.O.

8/5/21

25 John Dunlop D.O.

Date

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